Waiver Service	Code	Modifier	Maximum Rate	Unit	Service Cap
Adult Day Services - Health Model	S5101	U7	\$34.06	Half Day	Limited to five days (ten half-days) per week.
Adult Day Services - Social Model	S5101		\$26.84	Half Day	Limited to three days (six half-days) per week.
Assisted Living Facility Services - Standard	T2031		\$70.44	Daily	
Assisted Living Facility Services - Memory Care Unit	T2031	U8	\$82.49	Daily	
Case Management - Service Plan Development/Annual Update	T2024	U6	\$507.81	Initial Plan / Annual Update	Limited to one unit per year.
Case Management - Monitoring	T2022		\$193.50	Monthly	
Home Delivered Meals - Hot	S5170	SE	\$7.10	1 Meal	Limited to 2 meals per day
Home Delivered Meals - Frozen	S5170		\$5.25	1 Meal	
Home Health Aide	T1004		\$10.36	15 Minute	
Non-Medical Transportation - Public Transit Multipass	T2003		Variable	Per Purchase	
Non-Medical Transportation - Service Route	A0120		\$4.34	1 Trip (one- way)	
Non-Medical Transportation - Wheelchair Accessible Vehicle	A0130		\$9.75	1 Trip (one- way)	Limit of \$80 per month
Non-Medical Transportation - Non- Wheelchair Accessible Vehicle	T2004		\$6.20	1 Trip (one- way)	
Personal Emergency Response System (PERS) - Landline Installation	S5160		\$63.09	Per Installation	One installation over participant's lifetime unless otherwise warranted by extenuating circumstances.
PERS - Landline Monitoring	S5161		\$32.01	Monthly	
PERS - Cellular Installation	S5160	CG	\$63.73	Per Installation	One installation over participant's lifetime unless otherwise warranted by extenuating circumstances.
PERS - Cellular Monitoring	S5161	U4	\$41.73	Monthly	
Personal Support Services - Agency Based	S5125		\$8.91	15 Minute	
Personal Support Services - Participant Direction	S5125	U5	\$3.80	15 Minute	
Respite - In Home	S5150		\$10.36	15 Minute	Combined limit of the prorated equivalent of 30 days per service plan year.
Respite - Assisted Living Facility	S5151		\$80.38	Daily	
Respite - Skilled Nursing Facility	H0045		\$185.09	Daily	
Skilled Nursing Services - Registered Nurse (RN)	T1002		\$26.12	15 Minute	
Skilled Nursing Services - Licensed Practical Nurse (LPN)	T1003		\$18.86	15 Minute	